

HCRIS Data Dictionary

Column Code	Usage	Null/Not Null	Title	Description	Valid Entries
ADR_VNDR_CD	CHAR(3)	NULL	Automated Desk Review Vendor Code	Vendor for Fiscal Intermediary.	2 or A03 - E & Y 3 or A01 - KPMG 4 or A05 - HFS
ALPHNMRC_ITM_TXT	CHAR(40)	NOT NULL	Alphanumeric Item Text	Provider reported alpha data.	Per Specification Table
CLMN_NUM	CHAR(4)	NOT NULL	Column Number	Valid Column Number defined as follows: xxyy where xx = Column Number and yy = Sub-Column Number	Example: Column 1 = 0100, Column 1.01 = 0101
FI_CREAT_DT	DATE	NULL	Fiscal Intermediary Create Date	Date the FI created the HCRIS file.	MM/DD/YYYY
FI_NUM	CHAR(5)	NULL	Fiscal Intermediary Number	Fiscal Intermediary Number in effect at the time of cost report filing.	Assigned FI Number
FI_RCPT_DT	DATE	NULL	Fiscal Intermediary Receipt Date	Date cost report was received by Fiscal Intermediary.	MM/DD/YYYY
FY_BGN_DT	DATE	NULL	Fiscal Year Begin Date	Cost Report Fiscal Year beginning date.	MM/DD/YYYY
FY_END_DT	DATE	NULL	Fiscal Year End Date	Cost Report Fiscal Year ending date.	MM/DD/YYYY
INITL_RPT_SW	CHAR(1)	NULL	Initial Report Switch	Y or N, Y = the first cost report filed for this provider. (Not actively used.)	Y, N or blank
ITM_VAL_NUM	NUMBER	NOT NULL	Item Value Number	Provider reported numeric data.	Per HCRIS Specification Table
LAST_RPT_SW	CHAR(1)	NULL	Last Report Switch	Y or N, Y = the final cost report filed for this provider. (Not actively used.)	Y, N or blank
LINE_NUM	CHAR(5)	NOT NULL	Line Number	Valid Line Number defined as follows: xxxyy where xxx = Line Number and yy = Sub-Line Number	Example: Line 1 = 00100, Line 1.01 = 00101
NPR_DT	DATE	NULL	Notice of Program Reimbursement Date	Date Provider received NPR.	MM/DD/YYYY
NPI	NUMBER	NULL	National Provider Identifier	Unique health identifier for health care providers. Established under HIPAA.	Assigned NPI Number
PROC_DT	DATE	NULL	Process Date	The date the cost report was processed into HCRIS.	MM/DD/YYYY

HCRIS Data Dictionary

Column Code	Usage	Null/Not Null	Title	Description	Valid Entries
PRVDR_CTRL_TYPE_CD	NUMBER	NULL	Provider Control Type Code	Type of ownership from Table 3B of Specifications.	See Table (For T6 and prior see TOC Tab below)
PRVDR_NUM	CHAR(6)	NOT NULL	Provider Number	Valid Provider Number defined as follows: xxyyyy where xx = State Code and yyyy = Assigned Provider Range	
RPT_REC_NUM	NUMBER	NOT NULL	Report Record Number	HCRIS assigned cost report specific number.	
RPT_STUS_CD	CHAR(1)	NOT NULL	Report Status Code	Type of cost report.	1 = As Submitted 2 = Settled w/o Audit 3 = Settled with Audit 4 = Reopened 5 = Amended
SPEC_IND	CHAR(1)	NULL	Special Indicator	HCRIS code used for special purposes.	
TRNSMTL_NUM	CHAR(3)	NULL	The current transmittal or version number in effect for each sub-system.	Transmittal Number or transmittal version used to create the cost report	
UTIL_CD	CHAR(1)	NULL	Utilization Code	Level of Medicare utilization of filed cost report.	L - Low Medicare Util N - No Medicare Util F - Full Medicare Util Blank - Full Medicare Util
WKSHT_CD	CHAR(7)	NOT NULL	Worksheet Code	Valid worksheet code from Sub-system Worksheet Indicator Table (Table 2).	Example: Worksheet S-2 = S200000

Home Health Agency
Hospital
Hospice
End Stage Renal Disease (ESRD)
Skilled Nursing Facility

HHA
HOSP
HOSPC
RNL
SNF

For Cost Reports Processed Prior to Transmittal 7

- A Sole Proprietary
- B Partnership
- C Corporation
- D Non Profit
- E Other

SSA State Code Table (First and second number of Provider Number)
Effective October 2005

State_Name	Ssa_State_Cd
UNKNOWN	0
Alabama	1
Alaska	2
Arizona	3
Arkansas	4
California	05, 55
Colorado	6
Connecticut	7
Delaware	8
Washington D.C.	9
Florida	10, 68, 69
Georgia	11
Hawaii	12
Idaho	13
Illinois	14
Indiana	15
Iowa	16
Kansas	17, 70
Kentucky	18
Louisiana	19, 71
Maine	20
Maryland	21
Massachusetts	22
Michigan	23
Minnesota	24
Mississippi	25
Missouri	26
Montana	27
Nebraska	28
Nevada	29
New Hampshire	30
New Jersey	31
New Mexico	32
New York	33
North Carolina	34
North Dakota	35
Ohio	36
Oklahoma	37, 72
Oregon	38
Pennsylvania	39, 73
Puerto Rico	40
Rhode Island	41
South Carolina	42
South Dakota	43
Tennessee	44
Texas	45, 67, 74
Utah	46
Vermont	47

Virgin Islands	48
Virginia	49
Washington	50
West Virginia	51
Wisconsin	52
Wyoming	53
American Samoa	64
Guam	65
Other	99
Texas	67
Florida	68
Other	99

Numbering

Effective Octob

From	To
0001	0879
0880	0899
0900	0999
1000	1199
1200	1224
1225	1299
1300	1399
1400	1499
1500	1799
1800	1989
1990	1999
2000	2299
2300	2499
2500	2899
2900	2999
3000	3024
3025	3099
3100	3199
3200	3299
3300	3399
3400	3499
3500	3699
3700	3799
3800	3974
3975	3999
4000	4499
4500	4599
4600	4799
4800	4899
4900	4999
5000	6499
6500	6989
6990	6999
7000	7299
7300	7399
7400	7799
7800	7999
8000	8499
8500	8899
8900	8999

9000	9799
9800	9999

Convention for Types of Facilities:

er 2005

Type of Facility
Short Term (General and Specialty) Hospitals
Reserved for Hospitals participating in ORD Demo Project
Multiple Hospital Component in a Medical Complex (#'s Retired)
Reserved for Future Use
Alcohol/Drug Hospitals (#'s Retired)
Medical Assistance Facilities
Rural Primary Care Hospitals
Continuation of CMHC's (4900-4999 series)
Hospices
Federally Qualified Health Centers (FQHC)
Religious Non-Medical Health Care Institutions
Long-Term Hospitals (Excluded from PPS)
Chronic Renal Disease Facilities (Hospital Based)
Non-Hospital Renal Disease Treatment Centers
Independent Special Purpose Renal Dialysis Facility
Formerly Tuberculosis Hospitals (#'s Retired)
Rehabilitation Hospitals (Excluded from PPS)
Continuation of Subunits of Nonprofit & Proprietary HHA's (7300-7399 series)
Continuation of CORF's (4800-4899 series)
Children's Hospitals (Excluded from PPS)
Continuation of RHC's (Provider-based) (3975-3999 series)
Renal Disease Treatment Centers (Hospital Satellites)
Hospital Based Special Purpose Renal Dialysis Facility
Rural Health Clinics (Free Standing)
Rural Health Clinics (Provider Based)
Psychiatric Hospitals (Excluded from PPS)
Comprehensive Outpatient Rehabilitation Facilities
Community Mental Health Centers
Continuation of CORF's (4500-4599 series)
Continuation of CMHC's (4600-4799 series)
Skilled Nursing Facilities
Outpatient Physical Therapy Services/Speech Pathology Services
Skilled Nursing Services (Religious)
Home Health Agencies
Subunits of "Nonprofit" and "Proprietary" HHA's
Continuation of HHA's (7000-7299 series)
Subunits of State and Local Governmental HHA's
Continuation of HHA's (7400-7799 series)
Continuation of RHC's (Provider-based) (3400-3499 series)
Continuation of RHC's (Free-Standing) (3800-3974 series)

Continuation of HHA's (8000-8499 series)
Reserved for Future Use